



Peddler's Permit
 City of Arlington
 238 N Olympic Ave
 Arlington, WA 98223
 (360) 403-3421
www.arlingtonwa.gov

Application Fee: \$25.00

FOR OFFICE USE ONLY:

Peddler's Permit No.: _____

Application Date: _____

All persons, both principals and agents, as well as employers and employees, who sell, offer or expose for sale, or who shall trade, deal or traffic in any personal property or services in the City by going from house to house or from place to place or by indiscriminately approaching individuals must apply individually for a peddler's permit.

Two 2" x 2" head & shoulders photos taken within 60 days of application must be attached.

Applying as: Employee Employer Principal (Each Employee Must Complete Separate Permit Applications)

THIS IS AN APPLICATION ONLY AND NOT A PERMIT TO CONDUCT BUSINESS

Business Name:		Home Address:			
Applicant Name:		<p>All correspondence will be mailed to this address</p> Business Address:			
First	Middle			Last	
Date of Birth:				<p>All sales to occur on a parcel of land must be upon properly zoned property and a peddler's site plan / authorization must accompany the application.</p>	
Social Security #:				Description of Business Nature:	
Driver's License #:		Business Address:			
Business Phone:		Washington State Department of Revenue License #:			
Home Phone:		Height: Weight: Age:			
Business will be conducted: <input type="checkbox"/> Door to Door <input type="checkbox"/> Other _____ <input type="checkbox"/> Set Location / Address: _____		Hair Color: Eye Color: Gender:			
If employed or acting as an agent, please provide the name, address, and phone number of the employer(s) or principal(s) with the exact relationship with the principal or employer:					
<u>Name</u>		<u>Address</u>			
		<u>Phone Number</u>			
		<u>Relationship to Applicant</u>			
(Each employer and/or principal must also apply separately)					
Will a vehicle be used? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes →			
		License #:	Make: Model: Color:		
Has applicant (includes application by employer and/or principal) been convicted of any crime within the last ten years, including misdemeanors, gross misdemeanors, or violations of any municipal ordinance: <input type="checkbox"/> No <input type="checkbox"/> Yes. If yes, list the nature of the offense, and the punishment or penalty assessed.					
I hereby certify and declare under penalty of perjury under Washington law that the statements furnished by me on this application are true and complete to the best of my knowledge and that I will comply with the provisions of the Arlington Municipal Code in doing business in Arlington. I understand that falsification of this application is grounds revocation of my Peddler's Permit. Further, I give permission for an authorized representative of the City to conduct a criminal background check to include (but not limited to): a Washington State Patrol WATCH criminal background check, Criminal History Check (NCIC/WASIS), Driver's License check (DOL), local police database check (RMS), ACCURINT check, and any personal reference. I release from liability and I agree not to assert any claims or causes of action against all persons, corporations, and organizations supplying this information to the City of Arlington and/or its agents.					
Signature _____		Date: _____			

**PEDDLER'S PERMIT
PROPERTY OWNER'S AUTHORIZATION**

I, _____, owner of the property located at _____ hereby authorize _____ to conduct business on my property.

Signature

Date

STATE OF WASHINGTON)
 : ss.
COUNTY OF _____)

On this day personally appeared before me _____ and _____ respectively, of _____ the corporation/partnership/company/agency that executed the foregoing instrument, and acknowledged the said instrument to be the free and voluntary act and deed of said _____, for the uses and purposes therein mentioned, and on oath state that he/she/they was/were authorized to execute said instrument.

GIVEN under my hand and official seal this _____ day of _____, 20____.

Notary Public in and for the State of Washington

Residing at: _____

My appointment expires: _____

